

CHAPTER 11

SECTION 4.1

MILITARY-CIVILIAN HEALTH SERVICES PARTNERSHIP PROGRAM

Issue Date: January 15, 1988

Authority: Section 1096, Chapter 55, Title 10 and DoDI 6010.12

I. ISSUE

Policy regarding the Military-Civilian Health Services Partnership Program.

II. DEFINITION

The Military-Civilian Health Services Partnership Program (formerly known as the Joint Health Benefits Delivery Program) is a resource-sharing program which allows TRICARE beneficiaries to receive inpatient and outpatient services through TRICARE/CHAMPUS from civilian personnel providing health care services in military treatment facilities (MTFs) and from uniformed services professional providers in civilian facilities. The intent of the Partnership Program is to achieve more effective, efficient, or economical health care for authorized beneficiaries by combining military and civilian health care resources to best utilize available facilities and staff, to provide increased access to health care, and to reduce individual incident cost for the TRICARE beneficiary and program cost for the Government.

III. DISCUSSIONS

MTF commanders are responsible for entering into individual partnership agreements only when they have determined specifically that the use of the Partnership Program is more economical overall to the Government than referring the need for health care services to the civilian community under the normal operation of TRICARE/CHAMPUS. All agreements are subject to the review and approval of the Executive Director, TMA, or designee. There are two types of partnership agreements--the external and internal.

A. External Partnership Agreements. The external partnership agreement is an agreement between a MTF commander and a TRICARE/CHAMPUS authorized institutional provider, enabling military health care personnel to provide otherwise covered medical care to TRICARE/CHAMPUS beneficiaries in a civilian facility. Authorized costs associated with the use of the facility will be paid through TRICARE/CHAMPUS under normal cost-sharing and reimbursement procedures currently applicable under Standard TRICARE/CHAMPUS. Savings will be realized under this type agreement by using available military health care personnel to avoid the civilian professional provider charges which would otherwise be billed to TRICARE/CHAMPUS.

B. **Internal Partnership Agreements.** The internal partnership agreement is an agreement between a MTF commander and a TRICARE authorized civilian health care provider which enables the use of civilian health care personnel or other resources to provide medical care to TRICARE beneficiaries on the premises of a MTF. These internal agreements may be established when a MTF is unable to provide sufficient health care services for TRICARE beneficiaries due to shortages of personnel and other required resources. In addition to allowing the MTF to achieve maximum use of available facility space, the internal agreement will result in savings to the Government by using civilian medical specialists to provide inpatient care in Government-owned facilities, thereby avoiding the civilian facility charges which would have otherwise been billed to TRICARE/CHAMPUS.

IV. POLICY

A. **Coverage Criteria.** Claims identified as Partnership claims are payable under the following conditions:

1. Existing TRICARE/CHAMPUS requirements are met as concerns beneficiary eligibility and authorized providers.
2. The services rendered are otherwise covered within the TRICARE/CHAMPUS range of benefits.
3. The services are not provided by a resident or intern as part of the resident's or intern's training program or employment with a teaching hospital.
4. Other requirements of DoD Instruction 6010.12 ([Enclosure 1](#)) have been met.

B. **Claims Processing.** Claims processing procedures and procedures for evaluation of the agreements under the Partnership Program are outlined in the [OPM Part Two, Chapter 14](#).

C. **Partnership Program and Public Law 99-272.** The provisions of this law require MTFs to bill third-party payers the established government rate for those beneficiaries who have other health insurance. When an MTF bills a third-party payer, that bill should not include charges for the services of the Partnership provider. In those cases in which the MTF bills an all-inclusive rate, the charge for the Partnership provider should be deducted from the all-inclusive rate. The Partnership provider is responsible for billing the third-party payer for services he/she provides. Once the third-party payer has processed the claim, then the Partnership provider may bill TRICARE/CHAMPUS for the difference between the amount paid by the third-party payer and the amount to be paid under the Partnership agreement according to TRICARE/CHAMPUS rules on other health insurance.

D. **Cooperative Care and Partnership.** Cooperative Care policy is not to be applied to claims that are stamped "Partnership".

E. **Health Maintenance Organizations (HMOs) and Partnership.** See the [OPM Part Two, Chapter 14](#) for claims processing instructions.

F. **Teaching Programs and Partnership.** Partnership was not established for the purpose of setting up teaching programs at MTFs. Such agreements are not within the goals and

objectives of the Partnership Program and have not proven cost-effective. MTFs should be advised to pursue alternative contractual arrangements.

V. EFFECTIVE DATE

The provisions of this policy are effective October 22, 1987.

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